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## \*\* CONTINUING DATA \*\*\*\*\*

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## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

HD None

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>HD</u> Initials	STATE OR COUNTRY MN	SHEETS DRAWING 12	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 4
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## TITLE

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